

*Amended by the C.O. Authority per telephone conversation with Amanda Pecchioni Thompson on 7/7/2005.

EXAMINED BY *ATL*

FORM VA

CHECKED BY

 CORRESPONDENCE

Yes

FOR
COPYRIGHT
OFFICE
USE
ONLY

DO NOT WRITE ABOVE THIS LINE IF YOU NEED MORE SPACE, USE A SEPARATE CONTINUATION SHEET

PREVIOUS REGISTRATION Has registration for this work or for an earlier version of this work already been made in the Copyright Office?

 Yes No If your answer is Yes why is another registration being sought? (Check appropriate box) **V**a This is the first published edition of a work previously registered in unpublished formb This is the final application submitted by this author as copyright claimantc This is a changed version of the work, as shown by space 6 on this applicationIf your answer is Yes give Previous Registration Number **V**Year of Registration **V**

5

DERIVATIVE WORK OR COMPILED Complete both space 6a and 6b for a derivative work complete only 6b for a compilation

a Preexisting Material Identify any preexisting work or works that this work is based on or incorporates **V**

6

a See instructions before completing this space

b Material Added to This Work Give a brief general statement of the material that has been added to this work and to which copyright is claimed **V**

b

DEPOSIT ACCOUNT If the registration fee is to be charged to a Deposit Account established in the Copyright Office give name and number of Account Name **V** Account Number **V**

7

a

CORRESPONDENCE Give name and address to which correspondence about this application should be sent Name/Address/Apt/City/State/ZIP **V**

b

Amanda Pecchioni Thompson
ICE MILLER, One American Square, Box 82001, Indianapolis, Indiana, 46282-0200Area code and daytime telephone number **(317) 236-2264**Fax number **(317) 592-4857**

Email

CERTIFICATION I the undersigned hereby certify that I am the

check only one **>**

- author
 - other copyright claimant
 - owner of exclusive right(s)
 - authorized agent of **Australian Gold, Inc.**
- (Name of author or other copyright claimant, or owner of exclusive right(s))

of the work identified in this application and that the statements made by me in this application are correct to the best of my knowledge

Typed or printed name and date **V** If this application gives a date of publication in space 3 do not sign and submit it before that date

Amanda Pecchioni Thompson

Date **6/10/05**

8

Handwritten signature (X) **V**

X

A 6/27/05

Certificate will be mailed in window envelope to this address

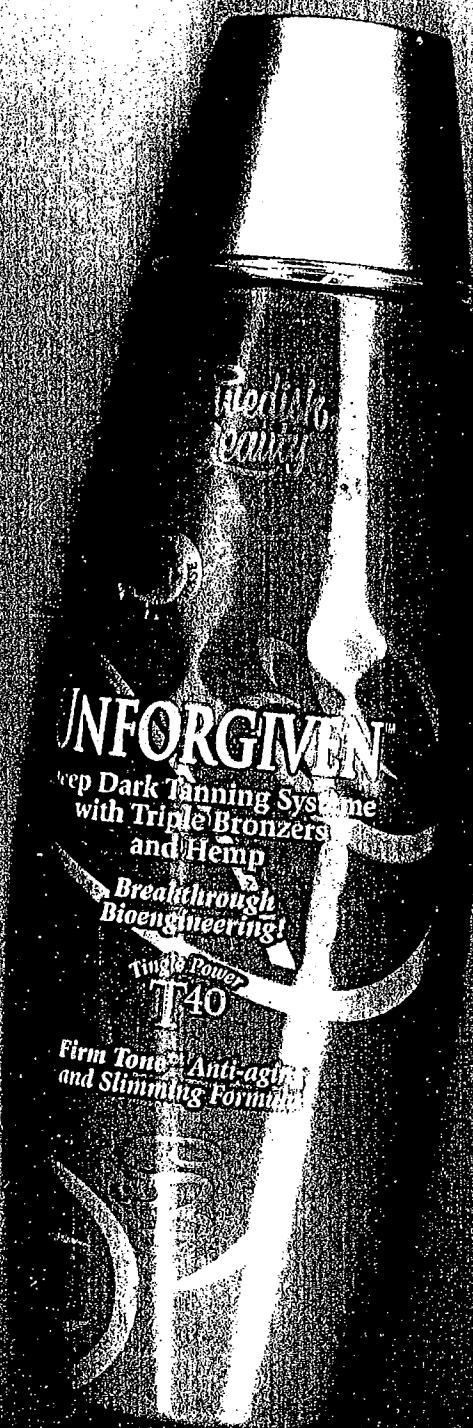
Name **V**
Amanda Pecchioni ThompsonNumber/Street/Apt **V**
ICE MILLER, One American Square, Box 82001City/State/ZIP **V**
Indianapolis, Indiana 46282-0200YOU MUST
• Complete all necessary spaces
• Sign your application in space 8• SEND ALL ELEMENTS
IN THE SAME PACKAGE

- 1 Application form
- 2 Nonrefundable filing fee in check or money order payable to Register of Copyrights
- 3 Deposit material

STATEMENT
Library of Congress
Copyright Office
101 Independence Avenue, S.E.
Washington, D.C. 20590-6000Fees are subject to change. For current fees check the Circular of Copyrights, available at www.copyright.gov or call 202-707-5400.

9

17 U.S.C. § 505(e). Any person who knowingly makes a false representation of a material fact in the application for copyright registration provided for by section 409 or in any written statement filed in connection with the application shall be fined not more than \$2,500.



Certificate of Registration



This Certificate issued under the seal of the Copyright Office in accordance with title 17, United States Code, attests that registration has been made for the work identified below. The information on this certificate has been made a part of the Copyright Office records.

Form VA
For a Work of the Visual Arts

VA 1-309-531



EFFECTIVE DATE OF REGISTRATION

July 13 2005

Month Day Year

Register of Copyrights, United States of America

Marybeth Peters

DO NOT WRITE ABOVE THIS LINE IF YOU NEED MORE SPACE, USE A SEPARATE CONTINUATION SHEET

1 Title of This Work ▼

Sun Dreams

NATURE OF THIS WORK ▼ See instructions

Label artwork

Previous or Alternative Titles ▼

Publication as a Contribution. If this work was published as a contribution to a periodical serial or collection, give information about the collective work in which the contribution appeared. Title of Collective Work ▼

If published in a periodical or serial give Volume ▼ Number ▼ Issue Date ▼ On Page ▼

2 NAME OF AUTHOR ▼

a Australian Gold, Inc

DATES OF BIRTH AND DEATH

Year Born ▼ Year Died ▼

Was this contribution to the work a "work made for hire"?
 Yes
 No

Author's Nationality or Domicile
 Name of Country
 OR Citizen of USA
 Domiciled in USA

Was This Author's Contribution to the Work
 Anonymous? Yes No
 Pseudonymous? Yes No
If the answer is either "Yes" or "No" to either of these questions is "Yes" see detailed instructions

NOTE

Under the law of a work made for hire is generally the employer not the employee (see Instructions). For any part of this work that was made for hire check "Yes" in the space provided above the employer (or other person for whom the work was prepared) as Author of that part and leave the space for dates of birth and death blank.

Nature of Authorship Check appropriate box(es) See Instructions
 3 Dimensional sculpture Map Technical drawing
 2-Dimensional artwork Photograph Text
 Reproduction of work of art Jewelry design Architectural work

b Name of Author ▼

Dates of Birth and Death
 Year Born ▼ Year Died ▼

Was this contribution to the work a "work made for hire"?
 Yes
 No

Author's Nationality or Domicile
 Name of Country
 OR Citizen of _____
 Domiciled in _____

Was This Author's Contribution to the Work
 Anonymous? Yes No
 Pseudonymous? Yes No
If the answer is either "Yes" or "No" to either of these questions is "Yes" see detailed instructions

Nature of Authorship Check appropriate box(es) See Instructions
 3-Dimensional sculpture Map Technical drawing
 2-Dimensional artwork Photograph Text
 Reproduction of work of art Jewelry design Architectural work

3

a Year in Which Creation of This Work Was Completed
 3/1/04 This Information must be given in all cases

b Date and Nation of First Publication of This Particular Work
 Complete this information Month April Day 1 Year 2004
 ONLY if this work has been published.
 Nation _____

4

COPYRIGHT CLAIMANT(S) Name and address must be given even if the claimant is the same as the author given in space 2 ▼

*Australian Gold, Inc

See instructions before completing this space

Transfer if the claimant(s) named here in space 4 is (are) different from the author(s) named in space 2 give a brief statement of how the claimant(s) obtained ownership of the copyright. ▼

APPLICATION RECEIVED
JUN 13 2005 JUN 13 2005
 ONE DEPOSIT RECEIVED
 TWO DEPOSITS RECEIVED
JUN 13 2005
 FUNDS RECEIVED
DO NOT WRITE HERE
 DO NOT WRITE HERE
 DO NOT WRITE HERE

MORE ON BACK ▶

• Complete all applicable spaces (numbers 8 & 9) on the reverse side of this page
 • See detailed instructions
 Sign the form at line 8

DO NOT WRITE HERE
 Page 1 of _____ pages

*Amended by the C.O. Authority per telephone conversation with Amanda Pecchioni Thompson on 7/7/2005.

EXAMINED BY *(Signature)*

FORM VA

CHECKED BY

 CORRESPONDENCE

Yes

FOR
COPYRIGHT
OFFICE
USE
ONLY

DO NOT WRITE ABOVE THIS LINE IF YOU NEED MORE SPACE, USE A SEPARATE CONTINUATION SHEET

PREVIOUS REGISTRATION Has registration for this work or for an earlier version of this work, already been made in the Copyright Office?

Yes No If your answer is Yes why is another registration being sought? (Check appropriate box) ▼

- a This is the first published edition of a work previously registered in unpublished form
- b This is the first application submitted by the author as copyright claimant.
- c This is a changed version of the work as shown by space 6 on this application

If your answer is Yes give Previous Registration Number ▼

Year of Registration ▼

5

DERIVATIVE WORK OR COMPILED WORK Complete both space 6a and 6b for a derivative work; complete only 6b for a compilation

a Preexisting Material Identify any preexisting work or works that this work is based on or incorporates ▼

6

a See instructions before completing this space

b Material Added to This Work Give a brief general statement of the material that has been added to this work and to which copyright is claimed. ▼

b

DEPOSIT ACCOUNT If the registration fee is to be charged to a Deposit Account established in the Copyright Office give name and number of Account.

Name ▼ Account Number ▼

7

a

CORRESPONDENCE Give name and address to which correspondence about this application should be sent Name/Address/Apt/City/State/ZIP ▼

b

Amanda Pecchioni Thompson
ICE MILLER, One American Square, Box 82001, Indianapolis, Indiana, 46282-0200

Area code and daytime telephone number (317) 236-2264

Fax number (317) 592-4857

Email

CERTIFICATION I the undersigned hereby certify that I am the

check only one ▶

- author
- other copyright claimant
- owner of exclusive right(s)
- authorized agent of Australian Gold, Inc

Name of author or other copyright claimant, or owner of exclusive right(s) ▲

of the work identified in this application and that the statements made by me in this application are correct to the best of my knowledge

8

Typed or printed name and date ▼ If this application gives a date of publication in space 1, do not sign and submit it before that date

Amanda Pecchioni Thompson

Date 6/10/05

Handwritten signature (X) ▼

X 6/27/05

X

Certificate will be mailed in window envelope to this address

Name ▼
Aranda Pecchioni Thompson
Number/Street/Apt ▼
ICE MILLER, One American Square, Box 82001
City/State/ZIP ▼
Indianapolis, Indiana 46282-0200

YOU MUST:

- Complete all necessary spaces
- Sign your application in space 8

SEND ALL ELEMENTS IN THE SAME PACKAGE

- 1 Application form
- 2 Nonrefundable filing fee in check or money order payable to Register of Copyrights
- 3 Deposit material

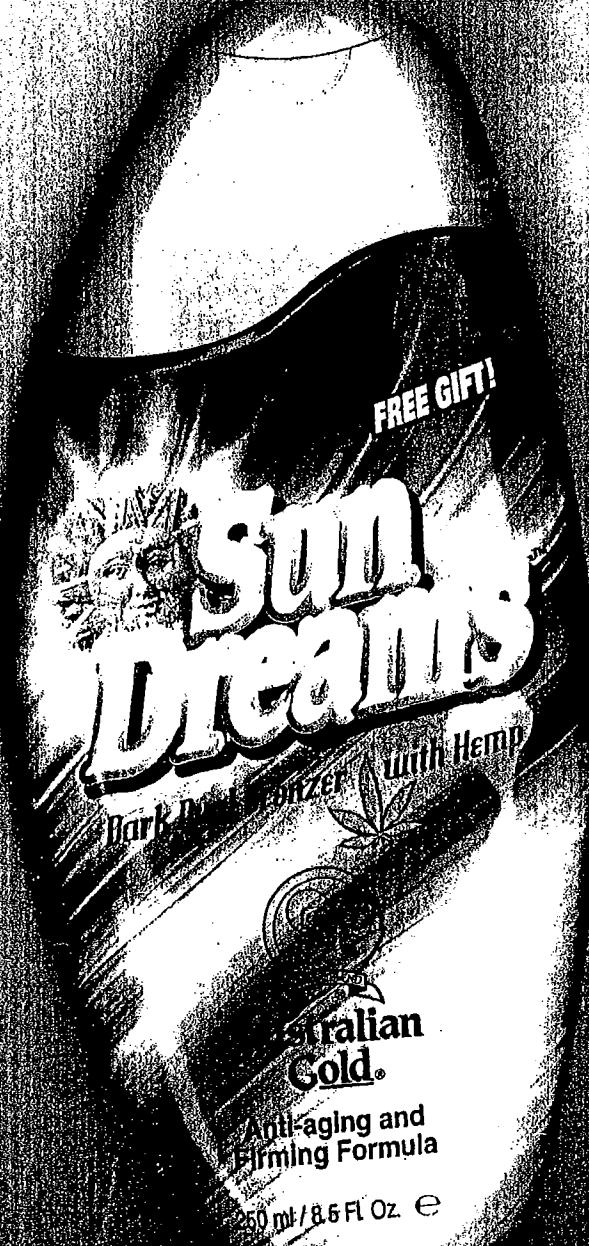
MAIL TO:

Library of Congress
Copyright Office
101 Independence Avenue, S.E.
Washington D.C. 20559-0000

9

Please see attached
for more information
about filing fees
Copyright Office
website at
www.copyright.gov
with the Copyright
Office or call
(202) 707-3000

17 U.S.C. § 505(c). Any person who knowingly makes a false representation of a material fact in the application for copyright registration provided for by section 409 or in any written statement filed in connection with the application, shall be fined not more than \$2,500.



Certificate of Registration



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Marybeth Peters

Register of Copyrights, United States of America

C Form VA
For a Work of the Visual Arts
UNITED STATES COPYRIGHT OFFICE

REC

VA 1-309-529



EFFECTIVE DATE OF REGISTRATION

JUN 13 2005

Month Day Year

DO NOT WRITE ABOVE THIS LINE IF YOU NEED MORE SPACE, USE A SEPARATE CONTINUATION SHEET

1 Title of This Work ▼

Simply Divine

NATURE OF THIS WORK ▼ See Instructions

Label artwork

Previous or Alternative Titles ▼

Publication as a Contribution: If this work was published as a contribution to a periodical, serial or collection, give information about the collective work in which the contribution appeared. Title of Collective Work ▼

If published in a periodical or serial give	Volume ▼	Number ▼	Issue Date ▼	On Page ▼
---	----------	----------	--------------	-----------

2 NAME OF AUTHOR ▼

a Australian Gold, Inc

Was this contribution to the work a "work made for hire"?

Yes
 No

Author's Nationality or Domicile

Name of Country

OR { Citizen of

USA

Domiciled in

USA

DATES OF BIRTH AND DEATH

Year Born ▼ Year Died ▼

Was This Author's Contribution to the Work

Anonymous? Yes No
Pseudonymous? Yes No

If the answer to either of these questions is "Yes" see detailed instructions

Nature of Authorship: Check appropriate box(es) See Instructions

- | | | |
|--|---|---|
| <input type="checkbox"/> 3-Dimensional sculpture | <input type="checkbox"/> Map | <input type="checkbox"/> Technical drawing |
| <input type="checkbox"/> 2 Dimensional artwork | <input type="checkbox"/> Photograph | <input type="checkbox"/> Text |
| <input type="checkbox"/> Reproduction of work of art | <input type="checkbox"/> Jewelry design | <input type="checkbox"/> Architectural work |

b Name of Author ▼

Dates of Birth and Death

Year Born ▼ Year Died ▼

Was this contribution to the work a "work made for hire"?

Yes
 No

Author's Nationality or Domicile

Name of Country

OR { Citizen of

USA

Domiciled in

Was This Author's Contribution to the Work

Anonymous? Yes No
Pseudonymous? Yes No

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|--|---|---|
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| <input type="checkbox"/> 2 Dimensional artwork | <input type="checkbox"/> Photograph | <input type="checkbox"/> Text |
| <input type="checkbox"/> Reproduction of work of art | <input type="checkbox"/> Jewelry design | <input type="checkbox"/> Architectural work |

3

a Year in Which Creation of This Work Was Completed
3/1/04

This Information must be given
Year in all cases

b Date and Nation of First Publication of This Particular Work
Complete this information Month April Day 1 Year 2004

Nation U.S.A.

4

COPYRIGHT CLAIMANT(S). Name and address must be given even if the claimant is the same as the author given in space 2 ▼

"Australian Gold, Inc

See instructions before completing this space

Transfer: If the claimant(s) named here in space 4 is (are) different from the author(s) named in space 2, give a brief statement of how the claimant(s) obtained ownership of the copyright ▼

APPLICATION RECEIVED

JUN 13 2005 ✓ JUN 13 2005

ONE DEPOSIT RECEIVED

TWO DEPOSITS RECEIVED

JUN 13 2005

FUND RECEIVED

JUN 13 2005

ONE DEPOSIT RECEIVED

JUN 13 2005

FUND RECEIVED

JUN 13 2005

MORE ON BACK ▶

Complete all applicable spaces (numbers 5-8) on the reverse side of this page

See detailed instructions

Sign the form at line 8

DO NOT WRITE HERE

Page 1 of _____ pages

*Amended by the C.O. Authority per telephone conversation with Amanda Pecchioni Thompson on 7/7/2005.

EXAMINED BY *ATC*

FORM VA

CHECKED BY

 CORRESPONDENCEFOR
COPYRIGHT
OFFICE
USE
ONLY Yes

DO NOT WRITE ABOVE THIS LINE IF YOU NEED MORE SPACE, USE A SEPARATE CONTINUATION SHEET

PREVIOUS REGISTRATION Has registration for this work or for an earlier version of this work; already been made in the Copyright Office?

 Yes No If your answer is "Yes" why is another registration being sought? (Check appropriate box) □

- a This is the first published edition of a work previously registered in unpublished form
- b This is the first application submitted by this author as copyright claimant
- c This is a changed version of the work as shown by space 6 on this application

If your answer is "Yes" give Previous Registration Number □

Year of Registration □

5

DERIVATIVE WORK OR COMPILATION Complete both space 6a and 6b for a derivative work; complete only 6b for a compilation

a Preexisting Material Identify any preexisting work or works that this work is based on or incorporates □

6

a See instructions before completing this space

b Material Added to This Work Give a brief general statement of the material that has been added to this work and in which copyright is claimed. □

b

DEPOSIT ACCOUNT If the registration fee is to be charged to a Deposit Account established in the Copyright Office, give name and number of Account.

Name □

Account Number □

7

a

CORRESPONDENCE Give name and address to which correspondence about this application should be sent Name/Address/Apt/City/State/ZIP □

Amanda Pecchioni Thompson
 ICE MILLER, One American Square, Box 82001, Indianapolis, Indiana, 46282-0200

b

Area code and daytime telephone number (317) 236-2264

Fax number (317) 592-4857

Email

CERTIFICATION* I, the undersigned, hereby certify that I am the

check only one ▶

- author
- other copyright claimant
- owner of exclusive right(s)
- authorized agent of **Australian Gold, Inc.**

None of author or other copyright claimant or owner of exclusive right(s). □

of the work identified in this application and that the statements made by me in this application are correct to the best of my knowledge

Typed or printed name and date □ If this application gives a date of publication in space 3 do not sign and submit it before that date

Amanda Pecchioni Thompson

Date 6/10/05

Handwritten signature (D) □

X

Certificate will be mailed in window envelope to this address

Name □ Amanda Pecchioni Thompson	YOUR STUDIO: • Complete all necessary spaces • Sign your application in space 9
Number/Street/Apt □ ICE MILLER, One American Square, Box 82001	SEND ALL 3 ELEMENTS IN THE SAME PACKAGE: 1. Application form 2. Nonrefundable filing fee in check or money order payable to Register of Copyrights 3. Deposit material
City/State/ZIP □ Indianapolis, Indiana 46282-0200	MAIL TO: Library of Congress Copyright Office 101 Independence Avenue, S.E. Washington D.C. 20559-6000

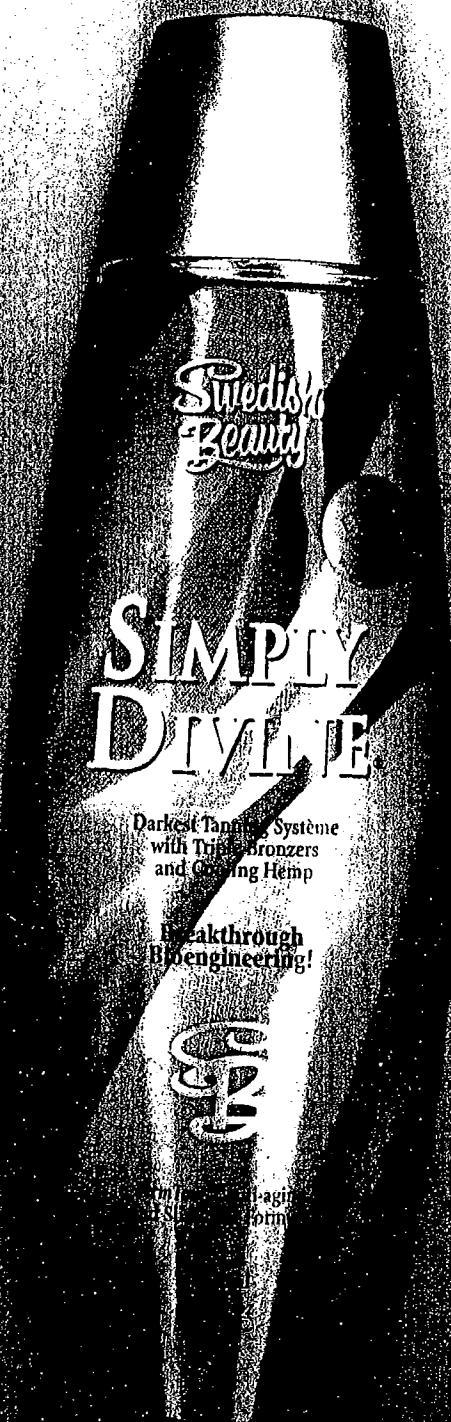
8

a

17 U.S.C. § 506(e) Any person who knowingly makes a false representation of a material fact in the application for copyright registration provided for by section 406 or in any written statement filed in connection with the application shall be fined not more than \$2,500.

9

For off-mailed in
changes. For more
information about
the Copyright Office
and its services,
see the Circular
of Copyright
titles at (202) 707-3000.



Certificate of Registration



This Certificate issued under the seal of the Copyright Office in accordance with title 17, United States Code, attests that registration has been made for the work identified below. The information on this certificate has been made a part of the Copyright Office records.

Register of Copyrights, United States of America

Form VA
For a Work of the Visual Arts
UNITED STATES COPYRIGHT OFFICE

VA 1-309-537

JUN 13 2005

EFFECTIVE DATE OF REGISTRATION

JUN 13 2005

Month Day Year

1

DO NOT WRITE ABOVE THIS LINE. IF YOU NEED MORE SPACE, USE A SEPARATE CONTINUATION SHEET

Title of This Work ▼

NATURE OF THIS WORK ▼ See instructions

Punk Diamond

Label artwork

Previous or Alternative Titles ▼

Publication as a Contribution If this work was published as a contribution to a periodical, serial or collection give information about the collective work in which the contribution appeared. Title of Collective Work ▼

If published in a periodical or serial give Volume ▼ Number ▼

Issue Date ▼

On Pages ▼

2

NAME OF AUTHOR ▼
a Australian Gold, Inc

DATES OF BIRTH AND DEATH
Year Born ▼ Year Died ▼

Was this contribution to the work a "work made for hire"? □ Yes □ No

Author's Nationality or Domicile
Name of Country
OR
Citizen of USA
Domiciled in USA

Was This Author's Contribution to the Work
Anonymous? □ Yes □ No If the answer to either
Pseudonymous? □ Yes □ No of these questions is
"Yes" see detailed
instructions

Nature of Authorship Check appropriate box(es) See instructions:

- 3-Dimensional sculpture
- Map
- Technical drawing
- 2-Dimensional artwork
- Photograph
- Text
- Reproduction of work of art
- Jewelry design
- Architectural work

Name of Author ▼

Date of Birth and Death
Year Born ▼ Year Died ▼

Was this contribution to the work a "work made for hire"? □ Yes □ No

Author's Nationality or Domicile
Name of Country
OR
Citizen of _____
Domiciled in _____

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instructions

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- 3-Dimensional sculpture
- Map
- Technical drawing
- 2 Dimensional artwork
- Photograph
- Text
- Reproduction of work of art
- Jewelry design
- Architectural work

3

a Year in Which Creation of This Work Was Completed
3/1/04

This information must be given
Year in all cases

b Date and Name of First Publication of This Particular Work
Complete this information Month April Day 1 Year 2004

U.S.A.

Nation

4

COPYRIGHT CLAIMANT(S) Name and address must be given even if the claimant is the same as the author given in space 2 ▼

See instructions
before completing
this space

*Australian Gold, Inc

Transfer If the claimant(s) named here in space 4 is (are) different from the author(s) named in space 2 give a brief statement of how the claimant(s) obtained ownership of the copyright. ▼

APPLICATION RECEIVED
JUN 13 2005 *Marybeth Peters*
ONE DEPOSIT RECEIVED

TWO DEPOSITS RECEIVED
JUN 13 2005
FUND RECEIVED

DO NOT WRITE HERE
OFFICE USE ONLY

MORE ON BACK ▶

• Complete all applicable spaces (numbers 5-8) on the reverse side of this page
• See detailed instructions
Sign the form at line 8

DO NOT WRITE HERE

Page 1 of _____ pages

*Amended by the C.O. Authority per telephone conversation with Amanda Pecchioni Thompson on 7/7/2005.

EXAMINED BY *AS*

FORM VA

CHECKED BY

 CORRESPONDENCE
 Yes
FOR
COPYRIGHT
OFFICE
USE
ONLY

DO NOT WRITE ABOVE THIS LINE IF YOU NEED MORE SPACE, USE A SEPARATE CONTINUATION SHEET

PREVIOUS REGISTRATION Has registration for this work or for an earlier version of this work, already been made in the Copyright Office?

 Yes No If your answer is Yes why is another registration being sought? (Check appropriate box) □a This is the first published edition of a work previously registered in unpublished formb This is the first application submitted by this author as copyright claimantc This is a changed version of the work as shown by space 6 on this application

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5

DERIVATIVE WORK OR COMPILED Work Complete both space 6a and 6b for a derivative work complete only 6b for a compilation

a Preexisting Material Identify any preexisting work or works that this work is based on or incorporates ▼

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b Material Added to This Work Give a brief general statement of the material that has been added to this work and to which copyright is claimed ▼

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DEPOSIT ACCOUNT If the registration fee is to be charged to a Deposit Account established in the Copyright Office give name and number of Account Name ▼ Account Number ▼

7

CORRESPONDENCE Give name and address to which correspondence about this application should be sent. Name/Address/Apt/City/State/ZIP ▼

a

b

Amanda Pecchioni Thompson
ICE MILLER, One American Square, Box 82001, Indianapolis, Indiana, 46282-0200

Area code and daytime telephone number (317) 236-2264

Fax number (317) 592-4857

Email

CERTIFICATION I the undersigned, hereby certify that I am the

check only one ▶

- | |
|--|
| <input type="checkbox"/> author |
| <input type="checkbox"/> other copyright claimant |
| <input type="checkbox"/> owner of exclusive right(s) |
| <input checked="" type="checkbox"/> authorized agent of <u>Australian Gold, Inc.</u> |

Name of author or other copyright claimant, or owner of exclusive right(s) &

of the work identified in this application and that the statements made by me in this application are correct to the best of my knowledge

Typed or printed name and date ▼ If this application gives a date of publication in space 3, do not sign and submit it before that date

Amanda Pecchioni Thompson

Date 6/10/05

Handwritten signature (X) ▼

X

AS 6/10/05

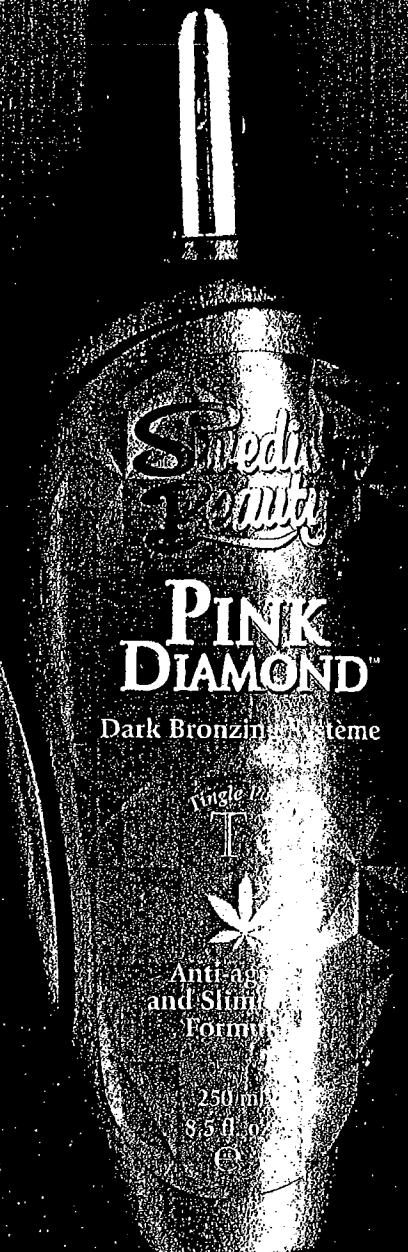
Certificate will be mailed in window envelope to this address

Name ▼ Amanda Pecchioni Thompson	TELEGRAMS Complete all necessary spaces. • Sign your application in space 8 MAIL ALL REMITTANCES IN THE SAME PACKAGE.
Number/Street/Apt ▼ ICE MILLER, One American Square, Box 82001	1 Application form 2 Nonrefundable filing fee in check or money order payable to Register of Copyrights 3 Deposit material
City/State/ZIP ▼ Indianapolis, Indiana 46282-0200	MAIL TO: Library of Congress Copyright Office 101 Independence Avenue, S.E. Washington, D.C. 20559-6000

For payment
and deposit
mail to:
Copyright
Office
U.S. Patent and
Trademark Office
101 Independence
Avenue, S.E.
Washington, D.C. 20559-6000
(202) 707-3000

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Marybeth Peters

Register of Copyrights, United States of America

Form VA
For a Work of the Visual Arts
U.S. Copyright Office

VA 1-309-532



EFFECTIVE DATE OF REGISTRATION

June 15 2005

Month Day Year

DO NOT WRITE ABOVE THIS LINE IF YOU NEED MORE SPACE, USE A SEPARATE CONTINUATION SHEET

1 Title of This Work ▼

Free Spirit

NATURE OF THIS WORK ▼ See instructions

Label artwork

Previous or Alternative Titles ▼

Publication as a Contribution. If this work was published as a contribution to a periodical, serial or collection give information about the collective work in which the contribution appeared. Title of Collective Work ▼

If published in a periodical or serial give	Volume ▼	Number ▼	Issue Date ▼	On Page ▼
---	----------	----------	--------------	-----------

2 NAME OF AUTHOR ▼

a Australian Gold, Inc

Was this contribution to the work a "work made for hire"?

Yes
 No

Author's Nationality or Domicile
Name of Country

OR
Citizen of _____
Domiciled in _____

DATES OF BIRTH AND DEATH
Year Born ▼ Year Died ▼

Was This Author's Contribution to this Work
Anonymous? Yes No
Pseudonymous? Yes No
If the answer to either of these questions is "Yes" see detailed instructions

Nature of Authorship Check appropriate box(es) See instructions

- 3-Dimensional sculpture Map Technical drawing
- 2-Dimensional artwork Photograph Text
- Reproduction of work of art Jewelry design Architectural work

Name of Author ▼

Dates of Birth and Death
Year Born ▼ Year Died ▼

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Yes
 No

Author's Nationality or Domicile
Name of Country

OR
Citizen of _____
Domiciled in _____

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Pseudonymous? Yes No
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- 2-Dimensional artwork Photograph Text
- Reproduction of work of art Jewelry design Architectural work

3 a Year in Which Creation of This Work Was Completed

3/1/04

This Information
must be given
in all cases

b Date and Nation of First Publication of This Particular Work

Complete this Information Month April Day 1 Year 2004

Nation

4

See instructions
before completing
this space

COPYRIGHT CLAIMANT(S) Name and address must be given even if the claimant is the same as the author given in space 2 ▼

Australian Gold, Inc.

APPLICATION RECEIVED

JUN 13 2005 JUN 18 2005

ONE DEPOSIT RECEIVED

TWO DEPOSITS RECEIVED

JUN 13 2005

FUND'S RECEIVED

MORE ON BACK ▶

• Complete all applicable spaces (numbers 5-9) on the reverse side of this page
See detailed instructions

Sign the form at line 8

DO NOT WRITE HERE

Page 1 of _____ pages

Case 2:05-cv-01217-JS-MLO Document 39

Filed 09/14/2005 Page 18 of 18

*Amended by the C.O. Authority per telephone conversation with Amanda Pecchioni Thompson on 7/7/2005.

EXAMINED BY *RJS*

FORM VA

CHECKED BY

CORRESPONDENCE

 YesFOR
COPYRIGHT
OFFICE
USE
ONLY

DO NOT WRITE ABOVE THIS LINE IF YOU NEED MORE SPACE, USE A SEPARATE CONTINUATION SHEET

PREVIOUS REGISTRATION Has registration for this work or for an earlier version of this work, already been made at the Copyright Office?

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5

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b

Amanda Pecchioni Thompson
ICE MILLER, One American Square, Box 82001, Indianapolis, Indiana, 46282-0200

Area code and daytime telephone number (317) 236-2264

Fax Number (317) 592-4857

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CERTIFICATION I, the undersigned, hereby certify that I am the

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 author other copyright claimant owner of exclusive rights authorized agent of Australian Gold, Inc.

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of the work identified in this application and that the statements made by me in this application are correct to the best of my knowledge

Typed or printed name and date ▼ If this application gives a date of publication in space 3 do not sign and submit it before that date

Amanda Pecchioni Thompson

Date 6/10/05

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8

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 Complete all mandatory spaces.
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